

**3149 Robbins Road • Springfield, IL 62704 • Phone 698-7000 • Fax 698-7009**

## Affiliate Member Application

1. Name \_\_\_\_\_  
Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Residence Address \_\_\_\_\_  
Town \_\_\_\_\_ Zip \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Firm Name \_\_\_\_\_  
Title Held \_\_\_\_\_ Business Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Business Address \_\_\_\_\_  
Town \_\_\_\_\_ Zip \_\_\_\_\_  
E-mail Address \_\_\_\_\_
2. In what business are you engaged? \_\_\_\_\_ For how long? \_\_\_\_\_
3. Is the business in which you are connected a: Corporation ☐ Partnership ☐ Sole Proprietorship ☐
4. Do you have an Illinois Salesperson or Broker license? ☐ Yes ☐ No  
If yes, who sponsors your license? \_\_\_\_\_
5. Do you list or sell real estate (*if yes, explain*)? ☐ Yes ☐ No \_\_\_\_\_
6. Do you have an Illinois Appraiser License or Certificate? ☐ Yes ☐ No
7. Do you actively appraise real property? \_\_\_\_\_  
For whom do you appraise? \_\_\_\_\_
8. Do you have an Illinois Home Inspector License? ☐ Yes ☐ No License Number \_\_\_\_\_
9. Have you ever held membership in the Capital Area Association of REALTORS® \_\_\_\_\_
10. Have you ever been a member of another REALTOR® Association? \_\_\_\_\_
11. State the name of any real estate Board of which you are now a member and the type of membership you hold \_\_\_\_\_

The below undersigned applicant understands that by providing the association with the applicant's mailing address(es), email address(es), telephone number(s), and fax number(s), applicant consents to receive communications, advertisements and solicitations sent by or on behalf of the Capital Area Association of REALTORS®, its subsidiaries and affiliates, namely the Illinois Association of REALTORS®, and the NATIONAL ASSOCIATION OF REALTORS® via U.S. mail, email, telephone, or facsimile at those number(s)/location(s) provided.

Referred by: \_\_\_\_\_

Date \_\_\_\_\_

Signature



Office Use Only:

Received / /

## Newsletter

Check #

Amount \$

NRDS:

[illegible]

## Affiliate Membership Information

☐ **Affiliate Membership Dues.** The first individual from a firm that joins the Association must join as an "Affiliate" Member (\$125) while subsequent individuals may join as a "Local" Affiliate Member (\$75). Affiliate Members automatically become a member of the state Association while Local Affiliate Members do not. State Association membership includes the Illinois REALTOR® magazine and invitations at member's prices to conventions and meetings. This application must be accompanied by one year's dues prorated for the calendar year. The following includes the annual dues (local & state) through 2014. The dues are pro-rated quarterly. Dues for following years are due on or before December 1 of each year. All dues are NON-REFUNDABLE.

	<b>1st Quarter</b> <u>(January 1 - March 31)</u>	<b>2nd Quarter</b> <u>(April 1 - June 30)</u>	<b>3rd Quarter</b> <u>(July 1 - September 30)</u>	<b>4th Quarter</b> <u>(October 1 - December 31)</u>
Local-	\$ 90.00	\$ 67.50	\$45.00	\$22.50
State-	35.00	26.25	17.50	8.75
*RPAC	<u>20.00</u>	<u>20.00</u>	<u>20.00</u>	<u>20.00</u>
<b>Total Due</b>	<b>\$145.00</b>	<b>\$113.75</b>	<b>\$82.50</b>	<b>\$51.25</b>

**\* RPAC Contributions are Voluntary:** RPAC, the REALTORS® Political Action Committee, collects contributions from members and uses those funds to help elect candidates for public office who are supportive of home ownership, private property rights, and the real estate industry. Contributions to RPAC are not deductible for Federal income tax purposes. Contributions to RPAC are voluntary, and you may refuse to contribute without affecting your membership rights.

Funds will only be sent to National RPAC if the contribution qualifies for use in Federal elections pursuant to Federal election laws.

Copies of reports for IMPAC and Illinois RPAC are on file and available for purchase from the State Board of Elections.

Affiliate Membership status may be granted to real estate owners and other individuals or firms, who, while not engaged in the real estate profession, have interests requiring information concerning real estate and are in sympathy with the objectives of the Association.

The following are eligible to receive "comparable" or "sold" information as defined in the Bylaws of the Capital Area Association of REALTORS®.

*"Association members who are actively engaged in real estate brokerage, management, mortgage financing, appraising, land development or building, but do not participate in the MIS, are nonetheless entitled to receive, by purchase or lease, information other than current listing information that is generated wholly or in part by the MIS, including "comparable" information, "sold" information, and statistical reports. This information is provided for the exclusive use of Association members and individuals affiliated with Association members, who are also engaged in the real estate business and may not be transmitted, re-transmitted, or provided in any manner to any unauthorized individual, office or firm, except as otherwise specified in the MIS Rules and Regulations. Association members who receive such information, either as an Association service or through the Association's MIS, are subject to the applicable provisions of the MIS Rules and Regulations whether they participate in the MIS or not."*

I hereby make application for AFFILIATE membership in the Capital Area Association of REALTORS®, in accordance with the Capital Area Association of REALTORS® Bylaws currently in effect.

I agree to abide by all provisions of the Bylaws, and other published regulations of the Association in force and as enacted or amended from time to time.

I consent that the Association, through its Membership Committee or otherwise, may from the date of filing of the application and until final acceptance or rejection invite and receive information and comment about me from any member or other person.

I agree that any information and comment furnished to the Association by any person in response to such invitation shall be conclusively deemed to be privileged and not form a basis of any action for slander, libel, defamation or character or other tort.

I waive all claims against the Association, its officers, directors and employees arising out of any act in connection with this application.



**Please make your checks payable to:  
Capital Area Association of REALTORS® or CAAR**

Visa ☐ MasterCard ☐ Check ☐ #

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Exp. Date \_\_\_\_\_ Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Amount \$

Date    /    /

**If you have any questions concerning this application please call Kathy Nicholson at 698-7000.**

## **Affiliate Affidavit**

Attached is a copy of pertinent sections of Article IV, Membership Classification, of the Bylaws of the Capital Area Association of REALTORS®. Article IV sets forth, among other things, the definition of an Affiliate member.

I hereby affirm under oath that I am eligible to be or to remain an Affiliate member of the Capital Area Association of REALTORS®; that I am not engaged in the business of representing buyers or sellers in the sale or lease of real estate nor do I accept referral fees from buyers or sellers.

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Date

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Name

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Company

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Signature